

CANOE CITY SWIM CLUB WRITTEN CONSENT FOR AN UNRELATED ADULT ATHLETE TO SHARE THE SAME HOTEL, SLEEPING ARRANGEMENT, OR OVERNIGHT LODGING LOCATION WITH A MINOR ATHLETE

As a parent/guardian of	, I give express written permission, and
(Athlete's Full Name - printed)	
grant an exception to the Minor Athlete Abuse Prevention Policy, fo	(Athlata's Full Name printed)
	(Athlete's run Name - printed)
to stay in the same hotel room of, or share a sleeping arrangement	or other overnight lodging location with,
from (Unrelated Adult Athlete's Full Name - printed) (Date	/ to/
(Unrelated Adult Athlete's Full Name - printed) (Date	s of Applicable Rooming ArrangementJ
at	·
(Location of hotel room or other overnight lodging location)	
I further acknowledge that this written permission is valid only for t	he dates and location specified herein.
Devent (Cuendian's Name (uninted)	
Parent/Guardian's Name (printed)	
Parent/Guardian's Signature	Date / /



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